

FOR INSTRUCTIONS, SEE BACK OF FORM

DISCLOSURE SUMMARY PAGE

MAR 18 2003

FORM DR-2 (Rev. 01/98)	DISCLOSURE REPORT
For Office Use Only	
Comm. #	21151
Indexed	db
Audited	db
Computer	db

COMMITTEE NAME (Must be same as on Statement of Organization)
Build Educational Spaces For Today and Tomorrow

IMPORTANT: Indicate type of committee you are reporting for: ☒ (6)

(1) Statewide/Legislative Candidate (2) Statewide PAC (3) State Party (4) County/Local Candidate
 (5) County PAC (6) Ballot Issue/Franchise Committee (7) County/City Central Committee
 (8) Support State of Candidates

Ellen B. Bergman 641-752-5933
 SIGNATURE OF TREASURER (of person filing this report) TELEPHONE

3-18-03
 DATE SIGNED

Routine Penalties Due For Late Filed Reports Range from \$20 to \$800

SEE INSTRUCTIONS ON BACK AND COMPLETE THE FOLLOWING SENTENCE:

I AM FILING A 3-20-03 REPORT FOR AN/A (1) ELECTION / (2) NON-ELECTION YEAR.
 (report date) Indicate one ☐

☐ CHECK IF AMENDMENT TO REPORT DATED _____

☐ Check if this is final (termination) report and attach Notice of Dissolution Form DR-3.
 (You must continue to file reports until a Notice of Dissolution is filed.)

Local Committees, enter Date of Election <u>3-25-03</u>
County & Local Committees, enter County in which Election is held <u>Marshall</u>

STATEMENT OF CASH ON HAND

CASH ON HAND at the beginning of the reporting period. (This is the total
 of all monies held by the committee. This amount MUST be the
 same as the cash on hand at the end of the last reporting period,
 or must be zero if this is first report filed.)

\$ -0-

ADD TOTAL MONEY TAKEN IN THIS PERIOD

Schedule A: Cash Contributions total (Attach Schedule A).....

7305.-

Schedule F: Loans Received total (Attach Schedule F).....

-

Schedule H: Total Sales of Campaign Property (Attach Schedule H).....

-

(Schedule H applies to Candidates' Committees Only)

SUB-TOTAL.....\$

7305.-

SUBTRACT TOTAL MONEY SPENT THIS PERIOD

Schedule B: Expenditures total (Attach Schedule B).....

6418.83

Schedule F: Loan Repayments total (Attach Schedule F).....

-

CASH ON HAND at the end of this reporting period (if final report, balance must
 be zero) (Attach DR-3)

\$ 886.17

UNPAID BILLS (From Schedule D - Attach Schedule D).....\$

-

IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E).....\$

-

OUTSTANDING LOANS (From Schedule F - Attach Schedule F).....\$

-

CANDIDATE COMMITTEES ONLY:

CONSULTANT BREAKDOWN (Schedule G Attached?)

___ YES ___ NO

VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)

\$ _____

For Instructions, See Back of Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE A (Rev. 06/97)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

Build Educational Spaces For Today - Tomorrow

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD

CAUTION: Section 68B.32A(6), Iowa Code, prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND-RAISER INCOME
1/31/03	ID# CK#	Independent Insurance 11 E. Church St. Marshalltown, IA 50158		\$ 500.-	
1-31-03	ID# CK#	Craig Shepherd 417 N. 8th St. Marshalltown, IA 50158		50.-	
1-31-03	ID# CK#	Loras Newirth 303 S. 12th St. Marshalltown, IA 50158		100.-	
2-4-03	ID# CK#	Bob Christenson 217 E. Ingledue St. Marshalltown, IA 50158		50.-	
2-4-03	ID# CK#	Marshalltown Medical - Surgical Center 3 S. 4th Ave. Marshalltown, IA 50158		750.-	
2-10-03	ID# CK#	Leo Herrick 2106 S. 12th St. Marshalltown, IA 50158		50.-	
2-10-03	ID# CK#	Floyd Harthun 6 Highland Acres Rd Marshalltown, IA 50158		50.-	
2-10-03	ID# CK#	Marshalltown Premier Linc 1406 S. 1st St. Marshalltown, IA 50158		500.-	
2-10-03	ID# CK#	United Bank & Trust 2101 South Center St. Marshalltown, IA 50158		50.-	
2-11-03	ID# CK#	Clapsaddle Garber Assoc. Inc. Box 754 Marshalltown, IA 50158		250.-	
SUB-TOTAL				\$ 2350.-	
TOTAL (If last page of this schedule)				\$	

* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage) (See Page 2 of forms packet.) If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 1 of 3
(for Schedule A)

For Instructions, See Back of Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization)

Build Educational Spaces for Today + Tomorrow

SCHEDULE

A

(Rev. 06/97)

MONETARY
RECEIPTS☐ CHECK THIS BOX IF
AMENDING FORM

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

CAUTION: Section 68B.32A(6), Iowa Code, prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YY)	PAC ID NUMBER (If applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (If applicable)	AMOUNT RECEIVED	✓ IF FOR FUND- RAISER INCOME
2-11-03	ID# CK#	Mark Smith 816 Roberts Terrace Marshalltown, IA 50158		\$ 50.-	
2-11-03	ID# CK#	William Edens 1705 Country Club Place Marshalltown, IA 50158		200.-	
2-14-03	ID# CK#	Cooper Manufacturing Company 410 S. 1st Avenue Marshalltown, IA 50158		500.-	
2-14-03	ID# CK#	Racom 201 W. State St. Marshalltown, IA 50158		500.-	
2-14-03	ID# CK#	Patrick Kremer 205 Harmony Dr. Marshalltown, IA 50158		100.-	
2-19-03	ID# CK#	Concrete, Inc. 1710 E. Main St. Marshalltown, IA 50158		500.-	
2-19-03	ID# CK#	Paul Koehler 2002 Stratford Lane Marshalltown, IA 50158		500.-	
2-19-03	ID# CK#	Larry McKibben 1703 Robertson Dr. Marshalltown, IA 50158		50.-	
2-24-03	ID# CK#	Fisher Controls 205 S. Center Marshalltown, IA 50158		750.-	
2-24-03	ID# CK#	Wells Fargo Bank 102 S. Center St. Marshalltown, IA 50158		500.-	
SUB-TOTAL				\$ 3650.-	
TOTAL (If last page of this schedule)				\$	

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Page 2 of 3
(for Schedule A)

For Instructions, See Back of Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE A (Rev. 06/97)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

Build Educational Spaces for Today-Tomorrow

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

CAUTION: Section 68B.32A(6), Iowa Code, prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YY)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND- RAISER INCOME
3-6-03	ID# CK#	Paul C. Hermanson 208 E. Church St. Marshalltown, IA 50158		\$ 100.-	
3-6-03	ID# CK#	Citizens Savings Bank 110 W. Southridge Marshalltown IA 50158		250.-	
3-10-03	ID# CK#	A. S. Stover Company 3809 S. Center St. Marshalltown IA 50158		250.-	
3-12-03	ID# CK#	Lennex Industries 200 S. 12th Avenue Marshalltown, IA 50158		500.-	
3-12-03	ID# CK#	U.S. Bank 123 W. Main St. Marshalltown, IA 50158		100.-	
	ID# CK#	Unitemized		105.-	
	ID# CK#				
	ID# CK#				
	ID# CK#				
	ID# CK#				

SUB-TOTAL

\$ 1305.-

TOTAL (If last page of this schedule)

\$ 7305.-

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Page 3 of 3
(for Schedule A)

FOR INSTRUCTIONS, SEE BACK OF FORM

EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD

SCHEDULE B (Rev. 09/97)	MONETARY EXPENDITURES
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

Build Educational Spaces For Today and Tomorrow

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
2-25-03	ID# CK#	Marshall Co Career Dev. 21 S. 2nd Avenue Marshalltown, IA 50158	980 Buttons	\$ 343.-
3-3-03	ID# CK#	Carter Printing 1739 E. Grand Ave Des Moines, IA 50316	1000 Yard Signs	1515.80
3-3-03	ID# CK#	Marshalltown Broadcasting 2280 Marsh Ave. Marshalltown, IA 50158	Advertising	796.20
3-3-03	ID# CK#	Times Republican 135 W. Main St. Marshalltown, IA 50158	Advertising	2904.-
3-3-03	ID# CK#	KDAO Radio 1930 N. Center St. Road Marshalltown, IA 50158	Advertising	405.-
3-8-03	ID# CK#	Kim Smith 205 N. Center St Marshalltown, IA 50158	Postage ^(365.-) & snacks for calling banks (89.83)	454.83
	ID# CK#			
	ID# CK#			

SUB-TOTAL \$ 6418.83

TOTAL (If last page of this schedule) \$ 6418.83

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 56.8(3)(1))

Page 1 of 1

(for Schedule B)